

## DISCLOSURE SUMMARY PAGE

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization)

IA ETHICS AND

CAMPAIGN DISCLOSURE

Citizens for Wessel-Kroeschell pm 5:14

IMPORTANT: Indicate by # type of committee you are reporting for: 1 2005 MAY 15 AM 9:25

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
 (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other  
 Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political  
 Subdivision PAC (11) Local Ballot Issue

## CANDIDATE COMMITTEES ONLY:

Candidate Name

Beth Wessel-Kroeschell

Political Party (if applicable)

Democrat

Office Sought

Representative - IA House

District (if Senate or House)

45

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Lucy A. Benn  
 SIGNATURE OF PERSON FILING REPORT

515-292-3015  
 TELEPHONE

May 14, 2005  
 DATE SIGNED

I AM FILING A May 19, 2005 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
 (report date) Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
 (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County &amp; Local Committees, enter County in which Election is held

## STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 7514.84

## ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

3908.00

Schedule F: Loans Received total (Attach Schedule F)

0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$ 11422.84

## SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

2041.12

Schedule F: Loan Repayments total (Attach Schedule F)

0

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)

\$ 9381.72

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\$ 288.00

\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 0

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$ 0

CONSULTANT BREAKDOWN (Schedule G Attached?)

\_\_\_ YES \_\_\_ NO

## CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ \_\_\_\_\_

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTS

☐ CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Wene & Kueschell

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
3-1-08	ID# CK#	Sue Ravenscroft 455 Westwood Dr. Ames, IA 50014		\$ 150	<input checked="" type="checkbox"/>
"	ID# CK#	Randi Peters 3127 Greenwood Rd. Ames, IA 50014		50	<input checked="" type="checkbox"/>
"	ID# CK#	Jasmine Scagrove 318 Westbrook Ln Ames, IA 50014		25	<input checked="" type="checkbox"/>
"	ID# CK#	Rudy J. Wildman 1015 Curtiss Ave Ames, IA 50010		50	<input checked="" type="checkbox"/>
"	ID# CK#	Harold & Marquerite McNabb Jr. 1232 Wisconsin Ames, IA 50014		150	<input checked="" type="checkbox"/>
"	ID# CK#	Ingrid Anderson 808 Douglas Ave. Ames 50010		25	<input checked="" type="checkbox"/>
"	ID# CK#	John Clem 2307 Timberland Rd Ames 50014		150	<input checked="" type="checkbox"/>
"	ID# CK#	Mary Jo Brearley 1537 Linden Dr. Ames 50010		50	<input checked="" type="checkbox"/>
"	ID# CK#	George Peter Belitsos 5508 Lincoln Way Ames 50014		30	<input checked="" type="checkbox"/>
"	ID# CK#	Carol Elbert 1528 Meadowlane Ave Ames 50010		10	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 690

TOTAL (if last page of this schedule)

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 5  
(for Schedule A)

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

*Citizens for Wesel Krieschell*

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3-1-08	ID# CK#	LAVERNA H. LARSON 111 Lynn Ave, Apt. 706 Ames 50014		\$ 50	<input checked="" type="checkbox"/>
"	ID# CK#	FRANCES Smith 2159 Country Club Blvd Ames 50014		25	<input checked="" type="checkbox"/>
"	ID# CK#	MARILYN Y. POTTER 1902 Northcrest Cir. Ames 50010		50	<input checked="" type="checkbox"/>
"	ID# CK#	Lowell GREIMANN 1518-13th ST. Ames 50010		100	<input checked="" type="checkbox"/>
3-8-08	ID# CK#	Dudley G. Luckett 1023 N. Hyland Ave Ames 50014		50	<input checked="" type="checkbox"/>
"	ID# CK#	ETHA Hutchcroft 2314 HAMILTON DR. Ames 50014		50	<input checked="" type="checkbox"/>
"	ID# CK#	CAROL Lamb 1451 TRUMAN PL Ames 50010		25	<input checked="" type="checkbox"/>
"	ID# CK#	FAITH W FINNEMORE 2107 Northcrest Dr. Ames 50010		100	<input checked="" type="checkbox"/>
"	ID# CK#	PATRICIA ANN Hopkins 2415 HAMILTON DR Ames 50014		15	<input checked="" type="checkbox"/>
"	ID# CK#	HERMAN C Quimbach 1002 JARRETT Circle Ames 50014		100	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 565	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

*Citizens for Wessel-Kroeschell*

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3-8-08	ID# CK#	CLAYTON SWENSON 2308 HAMILTON DR. AMES 50014		\$ 100	<input checked="" type="checkbox"/>
"	ID# CK#	JEANNETTE C SMITHSON 1817 NORTHCREST CT AMES 50010		50	<input checked="" type="checkbox"/>
"	ID# CK#	CARL TIPTON 415 BRIARWOOD PLACE AMES 50014		25	<input checked="" type="checkbox"/>
"	ID# CK#	LESLIE R. BLOOM 111 LYNN AVE, Apt. 601 AMES 50014		25	<input checked="" type="checkbox"/>
"	ID# CK#	C. LYNNE BISHOP 2609 EISENHOWER AVE AMES 50010		50	<input checked="" type="checkbox"/>
"	ID# CK#	PAUL & MARY ANN LUNDY 4316 PHOENIX AMES 50014		20	<input checked="" type="checkbox"/>
"	ID# CK#	LARRY W. CORMICKLE 1522 STONE BROOKE RD AMES 50010		25	<input checked="" type="checkbox"/>
"	ID# CK#	MARCIA L. THOMPSON 2728 MEADOW GLEN RD AMES 50014		25	<input checked="" type="checkbox"/>
"	ID# CK#	TOM FLACK 3128 NORTHWOOD DR. AMES 50010		100	<input checked="" type="checkbox"/>
"	ID# CK#	ROBERT KERKSIECK 621 GARDEN RD. AMES		50	<input checked="" type="checkbox"/>

SUB-TOTAL

TOTAL (if last page of this schedule)

\$ 470

\$

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

*Citizens for Wessel-Kroeschell*

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3-8-08	ID# CK#	HENRY W GRAY 1416 Maxwell Ames 50010		\$ 25	<input checked="" type="checkbox"/>
3-15-08	ID# CK#	JAN L. FLORA 1902 George Allen Ave Ames 50010		150	<input checked="" type="checkbox"/>
"	ID# CK#	Rebecca Hoepfner 3803 ONTARIO Ames 50014		25	<input checked="" type="checkbox"/>
"	ID# CK#	JANE T ZARING 1955 Meadow Glenn N Ames 50014		30	<input checked="" type="checkbox"/>
"	ID# CK#	ROBERT B MOORMAN 1223 9th ST. Ames 50010		25	<input checked="" type="checkbox"/>
"	ID# CK#	DORIS FOELL 1006 ARIZONA Ave Ames 50014		25	<input checked="" type="checkbox"/>
"	ID# CK#	CAROLE HOROWITZ 2014 Country Club Blvd. Ames 50014		25	<input checked="" type="checkbox"/>
"	ID# CK#	MARY E. RICHARDS 3217 West St. Ames 50014		50	<input checked="" type="checkbox"/>
"	ID# CK#	MARSHA REDDHEAD 1200 Ridgewood Ave Ames 50010		100	<input checked="" type="checkbox"/>
"	ID# CK#	ROY ZINGG 4309 Stone Brooke Rd. Ames 50010		25	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 480

TOTAL (if last page of this schedule)

\$

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(for Schedule A)

For Instructions, See Back of Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTS

☐ CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Wenzel-Knueschell

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3-20-08	ID# CK#	George Kizer 3919 Dawes Dr. Ames 50010		\$ 35-	<input checked="" type="checkbox"/>
"	ID# CK#	Irene Beavers 2200 HAMILTON DR, Apt. 208 Ames 50014		25	<input checked="" type="checkbox"/>
"	ID# CK#	Ann Nostwich 707 Hodge Ave Ames 50010		50	<input checked="" type="checkbox"/>
"	ID# CK#	Wayne Clinton 1610 Carroll Ames 50010		50	<input checked="" type="checkbox"/>
"	ID# CK#	Tan Bauer 2800 Pinchurst Circle Ames 50010		10	<input checked="" type="checkbox"/>
"	ID# CK#	James Torgensen 4207 Westbrook Dr. Ames 50014		10	<input checked="" type="checkbox"/>
"	ID# CK#	Achilles AAAAA mides 535 Forest Glen St. Ames 50014		50	<input checked="" type="checkbox"/>
"	ID# CK#	Joan Dubbecke 1523 Carroll Ave Ames 50010		50	<input checked="" type="checkbox"/>
"	ID# CK#	Thomas Weber 430 Lynn Ave Ames 50014		50	<input checked="" type="checkbox"/>
"	ID# CK#	Brent Wynja 1012 Hunziker Dr Ames 50010		50	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 380

TOTAL (if last page of this schedule)

\$

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTS

☐

CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Wend - Kroeschell

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3-20-08	ID# CK#	Beth W. Kroeschell 518 Ash Ave Ames 50014	Self	\$ 70	<input checked="" type="checkbox"/>
"	ID# CK#	Thomas Beell 1217 Roosevelt Ave Ames 50010		50	<input checked="" type="checkbox"/>
"	ID# CK#	Johnnie Hammond 2203 Northcrest Dr. Ames 50010		50	<input checked="" type="checkbox"/>
"	ID# CK#	DONOVAN OLSON 2103 Greene ST. Boone, IA 50036		50	<input checked="" type="checkbox"/>
"	ID# CK#	Teresa Rosenberg 511 Ridgewood Ave Ames 50010		50	<input checked="" type="checkbox"/>
"	ID# CK#	Stephen Ringlee 2325 Storm ST. Ames 50014		100	<input checked="" type="checkbox"/>
"	ID# CK#	JANICE Calentine-Bryant 2516 Woodview DR. Ames 50014		130	<input checked="" type="checkbox"/>
"	ID# CK#	JANE Halliburton 1128 Roosevelt Ames 50010		100	<input checked="" type="checkbox"/>
"	ID# CK#	JEANNETTE S. Bohnenkamp 2222 BARR DR. Ames 50010		20	<input checked="" type="checkbox"/>
"	ID# CK#	Susie Petra 2011 Duff Ave Ames 50010		25	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 645

TOTAL (If last page of this schedule)

\$

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(for Schedule A)

For Instructions, See Back of Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE

**A**  
(Rev. 07/03)

MONETARY  
RECEIPTS

☐ CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

*Citizens for Wenzel-Knoeschel*

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3-20-08	ID# CK#	Sandy Opstvedt 1309 PARK VIEW DR. STORY CITY, IA 50248		\$ 25	<input checked="" type="checkbox"/>
"	ID# CK#	CYNTHIA J. GAUNT 3423 CLINTON CT AMES 50010		25	<input checked="" type="checkbox"/>
"	ID# CK#	Veronica L. Fowler 1031 Ridgewood Ave. AMES 50010		25	<input checked="" type="checkbox"/>
"	ID# CK#	Josh EATON 1032 11TH AVE NEVADA, IA 50201		25	<input checked="" type="checkbox"/>
"	ID# CK#	GERMAINE C. PRESCOTT 2810 ROSS RD. AMES 50014		25	<input checked="" type="checkbox"/>
"	ID# CK#	JAMES A. GAUNT 3423 CLINTON CT. AMES 50010		25	<input checked="" type="checkbox"/>
"	ID# CK#	FRANCES LESCHIN WILKE 2136 FAILEY DR. AMES 50014		25	<input checked="" type="checkbox"/>
"	ID# CK#	CALVIN HALLIBURTON 1125 ROOSEVELT AMES 50010		70	<input checked="" type="checkbox"/>
"	ID# CK#	PASS THE HAT		93	<input checked="" type="checkbox"/>
3-29-08	ID# CK#	Leslie Osam Pensack 317 S. WILMOTH AVE AMES 50014		50	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 388	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)



For Instructions, See Back of Form

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTS

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COMMITTEE NAME (Must be same as on Statement of Organization)

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3-29-08	ID# CK#	JEAN D. LASSILA 3605 Ross Rd. Ames 50014		\$ 30	<input checked="" type="checkbox"/>
"	ID# CK#	Orle H. Ross 909 Hunziker Dr. Ames 50010		10	<input checked="" type="checkbox"/>
4-25-08	ID# CK#	Louise A. Lex 711 Jewell Dr. Ames 50010		25	<input checked="" type="checkbox"/>
"	ID# CK#	Sandra Kay McJimsy 2236 Storm St. Ames 50014		50	<input checked="" type="checkbox"/>
"	ID# CK#	M. BURTON Drexler 2529 Knapp St. Ames 50014		25	<input checked="" type="checkbox"/>
5-14-08	ID# CK#	Shirley Shaw 5527 Oak Ln. Ames 50014		75	<input checked="" type="checkbox"/>
"	ID# CK#	BARBARA J. Gwinda 3420 Eisenhower Ames 50010		25	<input checked="" type="checkbox"/>
"	ID# CK#	Lloyd C. Dumenil 309 N. Franklin Ave Ames 50014		50	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 290

TOTAL (if last page of this schedule)

\$ 3908

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

*Citizens for Welch-Kroeschell*

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7-13-07	ID# CK# 1078	Susan Judkins	Refund	\$ 25 <sup>00</sup>
1-25-08	ID# CK# 1080	US Postmaster Ames, IA	Postage	256 <sup>00</sup>
2-22-08	ID# CK# 1083	Copyworks 102 Welch Ave Ames 50014	Fliers for Fundraiser	263 <sup>22</sup>
2-21-08	ID# 1 CK# 1081	Iowa Democratic Party	VAN	1000 <sup>00</sup>
2-25-08	ID# CK# 1082	U.S. Postal Service Ames, IA	Postage	272.32
3-14-08	ID# CK# 1084	CURT SNOOK 802 CLARK AVE Ames, IA 50010	Music for fund RAISER	150 <sup>00</sup>
3-21-08	ID# CK# 1085	House Treasurer's Fund		50 <sup>-</sup>
4-12-08	ID# CK# 1086	Target Ames, IA	PARADE CANDY	24 <sup>58</sup>

SUB-TOTAL \$ 2041.12  
TOTAL (if last page of this schedule) \$ 2041.12

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE <b>D</b> (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

*Citizens for Wendt Kroeschell*

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD  
(DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
10/08/04	Beth Wessel-Kroeschell 518 Ash Ave Ames IA 50014	Newspaper Advertising	\$ 288 <sup>00</sup>
SUB-TOTAL			\$ 288 <sup>00</sup>
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 288 <sup>00</sup>

\*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 1  
(for Schedule D)

**CANDIDATE COMMITTEES NOTE:**

\*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.